



MISSOURI DEPARTMENT OF HEALTH
STATE PUBLIC HEALTH LABORATORY
DATAMASTER MAINTENANCE REPORT

RECEIVED DHSS Breath Alcohol Program
By Carol Day at 10:06 am, Mar 01, 2010

Complete this report in duplicate at the time of the regular monthly preventive maintenance check, and whenever instrument is repaired. Send copy to Department of Health; retain original in department file.

DATAMASTER SN 202004	INV. # F2546P	DATE OF INSPECTION 02-20-2010
LOCATION OF INSTRUMENT (STREET AND CITY) GREENE COUNTY JAIL 1000 N. BOINEVILLE AVE, SPRINGFIELD, MO, 65802		TIME OF INSPECTION 1249 HOURS

CHECKLIST: Place a check (✓) to the left of each item if found to be satisfactory or if operating within established limits. (Write in observed values where determined.) Unchecked items must be corrected before using instrument.

☒ **DIAGNOSTIC CHECK (PRINTOUT ATTACHED)**

☒ **COMPUTER**

☒ **DETECTOR**

☒ **PROGRAM**

☒ **FILTERS**

☒ **HEATERS SAMPLE CHAMBER** **50** °C

☒ **QUARTZ STANDARD**

☒ **FLOW DETECTOR**

☒ **CALIBRATION**

☒ **PUMP HIGH SPEED**

☒ **PRINTER**

☒ **INDICATOR LIGHTS**

☒ **TIME AND DATE**

☒ **SIMULATOR TEMPERATURE (34 °C ± 0.2°C)**

☒ **CALIBRATION CHECK -**

Run three tests using a standard solution. All three tests must be within ± 5% of the standard value and must have a spread of .005 or less. Check the box corresponding to the standard solution being used. (PRINTOUT ATTACHED) (USE RECIRCULATION PUMP)

☒ **0.100% STANDARD - MUST READ BETWEEN 0.095% and 0.105% INCLUSIVE**

☐ **0.040% STANDARD - MUST READ BETWEEN 0.038% and 0.042% INCLUSIVE**

(ONLY ONE STANDARD IS TO BE USED PER MAINTENANCE REPORT)

TEST 1 ☒ **0.095**

TEST 2 ☒ **0.096**

TEST 3 ☒ **0.095**

☒ **PERFORM R.F.I. TEST (PRINTOUT ATTACHED)**

☒ **NUMBER OF REFUSALS, SINCE LAST MAINTENANCE REPORT, AND NUMBER OF BREATH TESTS IN EACH RANGE AS FOLLOWS: (DO NOT INCLUDE SIMULATOR TESTS)**

REFUSALS	/	(0-.04)	0	(.05-.09)	0	(.10-.14)	1	(.15-.19)	0	(Over .19)	1
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List any new parts and describe any alteration or modification that was made to restore the instrument to operate satisfactorily and within established limits (use other side if necessary)

REPCO MARKETING INC. LOT # 09002 EXP. DATE 08-31-2011

0.10 SOLUTION

MEETS MDHSS REQUIREMENTS

INSPECTING OFFICER

SIGNATURE

K. D. Walters

PRINT NAME

K. D. WALTERS

TYPE II PERMIT NUMBER/EXPIRATION DATE

820203

06-24-2010

TELEPHONE NUMBER

(417) 895-6868

CERTIFICATE OF ANALYSIS

MANUFACTURER AND SUPPLIER: RepCo Marketing, Inc.

LOT NUMBER: 09002

EXPIRATION DATE: August 31, 2011 at 11:59 p.m.

RepCo Marketing, Inc. certifies the following:

RepCo Marketing, Inc. manufactured, tested and supplied Lot Number 09002 of Alcohol Certified Solution for simulators. Random samples of said lot number were analyzed by an independent laboratory utilizing a gas chromatograph and found to contain .1206 gms/dl +/- .003 gms/dl wt/vol ethanol (95% Confidence).

The alcohol and distilled water used in the solution were found to be free of any interfering substance.

This solution will produce a vapor alcohol value of .100 +/- 3% gms/210L Breath when heated to 34 Degrees Celsius +/- 0.2 Degrees Celsius in a simulator (95% Confidence).

The date of manufacture for this lot number is September 1, 2009.
The expiration date for this lot number is August 31, 2011
at 11:59 p.m.

This document is a true representation of the original Certificate of Analysis.



Cecil B. Garner, President
RepCo Marketing, Inc.

State of Missouri
DEPARTMENT OF HEALTH



P E R M I T
TYPE II



KENNETH D. WALTERS

is hereby authorized to instruct and supervise operators, train instructors, inspect, calibrate, perform field repairs, and operate the following breath analyzer(s):

DATAMASTER

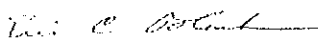
for the determination of the alcoholic content of blood from a sample of expired (alveolar) air. Issued under the provisions of sections 577.020 through 577.041, RSMo 1986.

Date 06/24/08

Number 820203

Expires 06/24/2010

MO 580-0771 (7-88)



Director of State Public Health Laboratory

Director, Department of Health

Lab. 4 (R7-88)

Face This Side Down - This Edge In First

BAC DataMaster Evidence Ticket

MISSOURI STATE HIGHWAY PATROL
BAC DATAMASTER SERIAL NUMBER 202004
06/20/10

TESTING OFFICER:

WALTERS/K/D

OFFICER I.D.# 674

PERMIT NUMBER: 820203

EXPIRATION DATE: 06/24/10

MISCELLANEOUS DATA:

MONTHLY MAINTENANCE

--- SUPERVISOR MODE ---

BLANK TEST	.000	12:59
INTERNAL STANDARD	VERIFIED	13:00
EXTERNAL STANDARD	.095	13:00
BLANK TEST	.000	13:01
EXTERNAL STANDARD	.096	13:01
BLANK TEST	.000	13:02
EXTERNAL STANDARD	.095	13:02
BLANK TEST	.000	13:03

N = 3

SIM. = .1

AVG. = .0953

Operator Signature

CPL. K. D. Walters 674

Face This Side Down - This Edge In First

BAC DataMaster Evidence Ticket

MISSOURI STATE HIGHWAY PATROL
BAC DATAMASTER SERIAL NUMBER 202004
06/20/10
12:49

--- DIAGNOSTIC CHECK ---

COMPUTER: OKAY

PROGRAM (04-07-2000): OKAY

HEATERS

SAMPLE CHAMBER: / 50c

FLOW DETECTOR: OKAY

PUMP

HIGH SPEED: OKAY

DETECTOR: OKAY

FILTERS: OKAY

QUARTZ STANDARD: OKAY

CALIBRATION: OKAY

PRINTER TEST

! " # \$ % & ' () * + , - . / 0 1 2 3 4 5 6 7 8 9 : ; < = > ? @ [\] ^ _ ` { | } ~
HIJKLMNOPQRSTUVWXYZ[\]^_`{ | } ~
abcdefghijklmnopqrstuvwxyz

Operator Signature

CPL. K. D. Walters 674

Face This Side Down - This Edge In First

BAC DataMaster Evidence Ticket

MISSOURI STATE HIGHWAY PATROL
BAC DATAMASTER SERIAL NUMBER 202004
02/20/10

ARREST TIME: 12:30
SUBJECT NAME:
DOE/J/J
DOB: 11/11/11 SEX: M
STATE/D.L.L.: MO/123456789
ARRESTING OFFICER:
WALTERS/K/D
OFFICER I.D.: 674
TESTING OFFICER:
SANE
OFFICER I.D.: 674
PERMIT NUMBER: 820203
EXPIRATION DATE: 06/24/10
MISCELLANEOUS DATA:
RFI TEST

--- BREATH ANALYSIS ---

BLANK TEST	.000	13:06
INTERNAL STANDARD	VERIFIED	13:06
RADIO INTERFERENCE		

Operator Signature

CAE K.D. Walters 674